

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
09 724 083

FILING DATE
11-28-00

APPLICANT(S)

LNU

460

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2	1					
3						
4		3				
5		3				
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16		3				
17		1				
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30	1					
31						
32						
33						
34						
35		3				
36	1					
37	1					
38	1					
39	1					
40	1					
41						
42						
43		3				
44		3				
45						
46						
47						
48						
49						
50						
TOTAL IND.	10					
TOTAL DEP.	166					
TOTAL CLAIMS	76					

	*	*	*
IND.	DEP.	IND.	DEP.
61	10		
62	3		
63	3		
64	3		
55	1		
56			
57			
58			
59			
60			
61			
62			
63			
64			
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92			
93			
94			
95			
96			
97			
98			
99			
100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			